

**Table S2- Characteristics of included studies addressing risk factors for complicated CDI and treatment failure**

Study Year of diagnosis* Country	Main outcome definition	Design Follow-up	Diagnostic test	Population	Comparison group	Quality variables	Mean/ median age $\pm$ SD Dispersion	N	% Outcome (n)	Method	Nv	EPV
Andrews 2003 [45] 1995-1999 Canada	Hospital stay $\geq$ 14 days, colectomy, ICU admission, death	RC	Toxin A EIA	Primary CDI discharge (ICD-10 008.45)	Patients with mild CDI	SI, IS, RS, AB, AU	63.4 <sup>\$</sup>	153	28.8 (44)	MLR	3	14.7
Greenstein 2008 [88] 1994-2006 USA	<b>Fulminant colitis:</b> pathologically confirmed pseudomembranous colitis after emergent colectomy	RCC	Toxin A and B EIA	Adult inpatients with fulminant CDI	Patient with nosocomial & community-acquired CDI	SI, PE, IS, AB, AU	70 <sup>\$</sup>	105 (35 vs. 70)	-	MLR	9	3.8
Gujja 2009 [97] 2003-2008 USA	<b>Complication:</b> colon resection or death	RC	Toxin A and B EIA	Primary CDI discharge (ICD-9 008.45)	Patients without complication	IS	68.8 <sup>\$</sup> $\pm$ 12.9	200	16 (32)	MLR	3	7.3
Hardt 2008[86] 2003-2006 Germany	<b>Severity:</b> profuse diarrhoea and positive shock index	RC	Direct CTA	Adult inpatients	Patients with non- severe CDI	SI, IS, RS, AB, AU	76 <sup>\$</sup>	124	21.7 (27)	MLR	9; 2 in reduced model	3
Henrich 2009 [41] 2005-2006 USA	<b>Severity:</b> 30-day death or $\geq$ 1 ICU admissions, colectomy, intestinal perforation	RC	Direct CTA and toxin A and B EIA	Inpatients non-ambulatory nor emergency	Patients with non-severe CDI	IS, RS, AU	All ages $\geq$ 18years	336	12.2 (41)	MLR	9	4.5
Kyne 1999 [87] 1995 Ireland	<b>Progression to severe disease:</b> associated morbidity, malnutrition, faecal incontinence, toxic megacolon or death	PC Until discharge or death	Direct CTA	Adult inpatients	Patients with mild /moderate CDI	IS, RS, AB, AU	74 <sup>¥</sup> 17-91	73	39.7 (29)	MLR	11/ 3 in reduced model	2.6
Manek 2011 [44] 2007-2008 Canada	<b>Severe complications:</b> hypokalaemia, toxic megacolon, bowel perforation, lower gastrointestinal bleeding, ICU transfer or death	RC	Toxin A and B EIA	Inpatients with CDI	Inpatients with CDI without complications	SI, PE, RS	71 <sup>\$</sup> $\pm$ 16	365	26.6 (97)	MLR	13	7.5
Pepin 2004 [42] 1991-2003 Canada	<b>Complication:</b> toxic megacolon, perforation, colectomy or shock requiring vasopressor therapy or all-cause 30-day death	RC	Direct CTA	Inpatients with CDI	Patients without complications	SI, PE, IS, RS, AB	All ages	1721	10.6 (182)	Unconditional MLR	8	22.7

Study Year of diagnosis* Country	Main outcome definition	Design Follow-up	Diagnostic test	Population	Comparison group	Quality variables	Mean/ median age ± SD Dispersion	N	% Outcome (n)	Method	Nv	EPV
Rao 2013 [47] 2010- 2012 USA	<b>Severity:</b> WBC > 15x10 <sup>3</sup> /mm <sup>3</sup> , temperature > 38°C, or acute organ dysfunction (clinical score), and/or no initial response to therapy, and ICU stay, colectomy, 30-day attributable death	PC	GDH + Toxin A and B EIA/ PCR when GDH+/toxin-	Inpatients with CDI	-	SI, IS, AB	58 <sup>¥</sup> 20- 88	69	30.4 (21 clinical score)/ 39.1 (27 expanded score)	MLR	7	4 (expand-ed score)
Walk 2012 [48] 2010- 2011 USA	<b>Severity:</b> ICU admission, surgery or 30-day death	RC	PCR on positive culture	Suspected CDI inpatients and ambulatory outpatients	-	SI	57 <sup>¥</sup> 0.5- 93	310	11 (34)	MLR	11	3.1
Wenisch 2012 [85] 2009-2010 Austria	<b>Severe CDI:</b> ICU admission, surgery for CDI, death directly or contributively due to CDI	RC	Toxin A and B EIA and PCR	Hospital-acquired CDI in medicine wards	Patients with non-severe CDI	SI	74.4 <sup>§</sup> 37-92	133	18.1 (24)	MLR	4	6
<b><i>Treatment failure considered alone</i></b>												
Fernandez 2004 [98] 2000-2001 USA	<b>Failure of MTZ:</b> persistence of fever or abdominal pain or ≥3 bowel movements/ day after 5 full days of treatment	RC	Toxin A EIA	Inpatients with CDI who received MTZ as initial therapy for ≥5 days	Patients who improved with MTZ	RS, AB	66 <sup>§</sup> 23-96	99	38.4 (38)	MLR	7	5.4
Hu 2008 [50] 2004-2006 USA	<b>Failure of MTZ:</b> persistence of diarrhoea for ≥10 days or clinical decision to start vancomycin before 10-days endpoint	PC 60 days	NS toxin assay	Adult inpatients with CDI	Patients with CDI before NAP-1 strain (1998)	SI, PE, IS, AB, AU	70 <sup>¥</sup> 22-94	89	31.5 (28)	MLR	4	7

Nv= number of variables in the final model. EPV= events per variable. NR= not reported. MTZ= metronidazole.

\*Year of diagnosis= year(s) of cases diagnosis.

§ Mean age; ¥ Median age.

Design: RC= retrospective cohort; PC=prospective cohort; RCC=retrospective case-control; PCC=prospective case-control.

Diagnostic test: NS= Not specified, EIA= Enzyme immunoassay, CTA= cytotoxin assay, PCR= Polymerase chain reaction;

Quality variables: SI= site of acquisition of the infection (nosocomial vs. community-acquired), PE= previous episode(s) of CDI, IS= immunosuppression, RS= recent surgeries and procedure, AB= recent antibiotherapy, AU= use of anti-ulcer medication.